Pace Analytical

CHAIN-OF-CUSTODY / Analytical Re
The Chain-of-Custody is a LEGAL DOCUMENT. All relev

WO#: 1287297
PM: MMW Due Date: 05/24/17
CLIENT: USS CORP

Section A
Required Client Information:

Company	USS Corporation
Address	P O Box 417
	Mt. Iron, MN 55768
Phone	
Fax	
Requested Due Date	

Section B
Required Project Information:

Report To	Tom Moe
Copy To	
Purchase Order #	
Project Name	NPDES LINE 3 Wkly
Project #	

Section C
Invoice Information:

Attention	
Company Name	
Address	
Pace Quote	
Pace Project Manager	heather.zika@pacelabs.com,
Pace Profile #	

Regulatory Agency
State / Location — 1

MATRIX CODE

	CODE			CODE
Drinking Water	DW	Oil	OL
Water	WT	Wipe	WP
Waste Water	WW	Air	AR
Product	P	Other	OT
Soil/Solid	SL	Tissue	TS

SAMPLE ID
One Character per box.
(A-Z, 0-9 / , -)
Sample Ids must be unique

ITEM #	SAMPLE ID	MATRIX CODE	SAMPLE TYPE	COLLECTED DATE START	TIME	DATE END	TIME
1	WS-002 Scrubber Make-Up	WT		5/07/17	0855		
2	WS-003 Thickner Overflow	WT		5/07/17	0915		
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

Preservatives: # OF CONTAINERS, Unpreserved, H2SO4, HNO3, HCl, NaOH, Na2S2O3, Methanol, Other

Analyses Test | Y/N

Analyses Test	Y/N	Item 1	Item 2
LAB FILTERED SO4	X	X	X
Lab FILTERED Ca,Mg,Hard	X	X	X

Requested Analysis Filtered (Y/N)
Residual Chlorine (Y/N)

Item 1: LF,LF — 001
Item 2: LF,LF — 002

ADDITIONAL COMMENTS

RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME
(signature)	5/07/17	0955	(signature)	5/07	1055

SAMPLE CONDITIONS

TEMP in C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
3.3	Y	N	Y

SAMPLER NAME AND SIGNATURE
PRINT Name of SAMPLER:
SIGNATURE of SAMPLER:
DATE Signed: 5/10/17

Sample Condition Upon Receipt

Client Name: USS

Project #:

WO#: 1287297
PM: MMW   Due Date: 05/24/17
CLIENT: USS CORP

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client ☐ Commercial ☐ Pace ☐ Other: _____

Tracking Number: _____

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No   **Seals Intact?** ☐ Yes ☒ No

Optional: Proj. Due Date: Proj. Name:

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ None ☒ Other: hanpad   **Temp Blank?** ☒ Yes ☐ No

Thermometer Used: ☒ 140792808   **Type of Ice:** ☒ Wet ☐ Blue ☐ None ☒ Samples on ice, cooling process has begun

Cooler Temp Read °C: 3.0   **Cooler Temp Corrected °C:** 3.3   **Biological Tissue Frozen?** ☐ Yes ☐ No ☒ NA
Temp should be above freezing to 6°C   **Correction Factor:** +0.3   Date and Initials of Person Examining Contents: 5/11/2mw

Comments:

Chain of Custody Present?	☒ Yes	☐ No	☐ N/A	1.	
Chain of Custody Filled Out?	☒ Yes	☐ No	☐ N/A	2.	
Chain of Custody Relinquished?	☒ Yes	☐ No	☐ N/A	3.	
Sampler Name and Signature on COC?	☒ Yes	☐ No	☐ N/A	4.	
Samples Arrived within Hold Time?	☒ Yes	☐ No	☐ N/A	5. If Fecal: ☐ <8 hours ☐ >8, <24 hours ☐ >24 hours	
Short Hold Time Analysis (<72 hr)?	☐ Yes	☒ No	☐ N/A	6.	
Rush Turn Around Time Requested?	☐ Yes	☒ No	☐ N/A	7.	
Sufficient Volume?	☒ Yes	☐ No	☐ N/A	8.	
Correct Containers Used?	☒ Yes	☐ No	☐ N/A	9.	
-Pace Containers Used?	☒ Yes	☐ No	☐ N/A		
Containers Intact?	☒ Yes	☐ No	☐ N/A	10.	
Filtered Volume Received for Dissolved Tests?	☐ Yes	☐ No	☒ N/A	11. Note if sediment is visible in the dissolved containers.	
Sample Labels Match COC?	☒ Yes	☐ No	☐ N/A	12.	
-Includes Date/Time/ID/Analysis Matrix: wg					
All containers needing acid/base preservation will be checked and documented in the pH logbook.	☐ Yes	☐ No	☒ N/A	See pH log for results and additional preservation documentation	
Headspace in Methyl Mercury Container	☐ Yes	☐ No	☒ N/A	13.	
Headspace in VOA Vials (>6mm)?	☐ Yes	☐ No	☒ N/A	14.	
Trip Blank Present?	☐ Yes	☐ No	☒ N/A	15.	
Trip Blank Custody Seals Present?	☐ Yes	☐ No	☒ N/A		
Pace Trip Blank Lot # (if purchased):					

CLIENT NOTIFICATION/RESOLUTION   **Field Data Required?** ☐ Yes ☐ No

Person Contacted: _____   Date/Time: _____

Comments/Resolution: _____

_____

_____

FECAL WAIVER ON FILE   Y   N   **TEMPERATURE WAIVER ON FILE**   Y   N

Project Manager Review: _____   **Date:** 5-11-17

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e out of hold, incorrect preservative, out of temp, incorrect containers)